

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO. **09/555233 1** FILING DATE **13 JUL 2000**

APPLICANT(S) *Kojima*

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*			*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
1	/						51									
2		/					52									
3		/					53									
4		/					54									
5	/						55									
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39							89									
40							90									
41							91									
42							92									
43							93									
44							94									
45							95									
46							96									
47							97									
48							98									
49							99									
50							100									
TOTAL IND.	4						TOTAL IND.									
TOTAL DEP.	7						TOTAL DEP.									
TOTAL CLAIMS	11						TOTAL CLAIMS									